



Participant Care Plan

1. Click: Participant Care Plan tab on Participant Summary page

2. Click: Create New Plan

3. Select: Care Plan Type from dropdown

Care Plan Type:

4. Subjective

- Enter: Subjective information

5. Objective

- Auto populated from Health Assessment
- Enter: Notes as needed

6. Assessment

- Auto populated with Nutrition Risk(s) assigned during most recent certification
- Enter: Notes as needed

7. Education Topics

- Click: Nutrition Education Contact to add a topic
- Or
- Completed education topics are auto populated
 - Click: Edit to add or delete a topic

Education Topics: [edit](#)

Adjust feeding to meet developmental/sensory needs
Budgeting/shopping for food
Dental concern management
Fiber

- Click: Boxes next to selected Education Topics
- Click: Save

Participant Care Plan | Alerts | Staff Notes | Referrals

Choose Type: All

Date	Type	Author	Goals
A Care Plan has not been set up.			

CREATE NEW PLAN | View Past Plans

Subjective:

Objective:

Age: 3 y 8 m
Bloodwork Date: 7/31/2020
Hemoglobin: 12
Anthropometrics Date: 7/31/2020
Height: 26 in
Weight: 23 lbs
BMI: 23.9

Assessment:

Certification Risks:
Risk 344: Thyroid Disorders

Education Topics:

Please add a [Nutrition Education Contact](#)

Select Topic:

- ☒ Adjust feeding to meet developmental/sensory needs
- ☒ Budgeting/shopping for food
- ☒ Dental concern management
- ☐ Diabetes nutrition
- ☐ Diarrhea/constipation management
- ☐ Drug nutrient interaction management
- ☒ Fiber
- ☐ Food allergy/sensitivity
- ☐ Food preparation/recipes
- ☐ Food safety (selection, storage, choking)
- ☐ Formula preparation/storage
- ☐ Growing food
- ☐ Healthy balanced eating (specific to category)
- ☐ Heartburn management
- ☐ High iron foods – pica
- ☐ Increase nutrient/calorie dense foods
- ☐ Infant CVV Education

SAVE



8. Referrals

- Click: Add more to add more referrals

Referrals: [add more](#)

- Click: Box(s) to select referral(s)
- Click: Save

SAVE

Select Referrals:

- ☐ 2-1-1 Careline : Childcare
- ☐ 2-1-1 Careline : Food
- ☐ 2-1-1 Careline : Housing
- ☐ 2-1-1 Careline : Medical
- ☐ 2-1-1 Careline : Other
- ☐ 2-1-1 Careline : Social Support
- ☐ RF Management Problems

- Click: Edit to add follow-up information and notes to a referral

Registered Dietitian [edit](#)
SNAP [edit](#)
Substance Abuse [edit](#)
TANF/Cash Assistance [edit](#)

- Click: Edit to add notes

[EDIT](#) [FOLLOW-UP](#) [CANCEL](#)

- ✓ Enter: Notes

- ✓ Click: Save

Referral: SNAP

Notes:

SAVE CANCEL

- Click: Follow-Up to add follow-up information

- ✓ Enter: Follow-up date,
- ✓ Select: Results from dropdown
- ✓ Enter: Notes
- ✓ Click: Save

Edit Referral follow-up screen

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Date: 2/10/2020 (Last Modified: 2/10/2020) Author:

Follow-up Date:

Referral: Medicaid/Chip Follow-up Result:

Notes: Follow-up Notes:

SAVE CANCEL

9. Handouts

- Enter: Handout(s) that were given to the participant

Handouts:

1:

2:

10. Goals

- Enter: Participant's goal(s)
 - If participant is not ready to set a goal, enter "No goal was set" or re-use a goal the participant is continuing to focus on

Goals:

1:

2:

11. Counseling / Plan

- Enter: Information as needed

Counseling / Plan:

12. Optional

- Click: Box(s) (a) for sections of care plan to be copied to other family members

▪ S = Subjective O = Objective A = Assessment P = Plan

Note: Selecting P allows for Topics, Goals, Referrals, and Handouts to be selected (d)

Optional

Copy ☐ S ☐ O ☐ A ☐ P (a)

To: ☐ All Participants in this Family (ACT/APP/TEMP) (b)

or (c)

Optional

Copy ☐ S ☐ O ☐ A ☒ P (a)

☐ Topics ☐ Goals ☐ Referrals ☐ Handouts (d)

To: ☐ All Participants in this Family (ACT/APP/TEMP)

or

- Select: All Participants box (b) to copy Care Plan to all family members (ACT/APP/TEMP)

OR

- Select: Participant from dropdown (c) to have Care Plan copied to an individual

13. High Risk

- Check: Box if Participant Care Plan is High Risk

☒ This is a HIGH RISK Care Plan

14. Click: Save

SAVE

15. Care Plan Updated message will appear if Participant Care Plan has successfully saved

Care Plan Updated

16. Participant Care Plan tab will display the newest Care Plan

Participant Care Plan Alerts Staff Notes Referrals

Choose Type: All

Date	Type	Author	Goals
2/11/2020	Certification		Prepare meals at least 6 days a week rather than going to restaurants

CREATE NEW PLAN View Past Plans

17. To view past care plans:

- Click: View Past Plans box (a)
- Click: Line of plan to view (b)

OR

- Click: Participant Care Plan on left navigation

- Click: Line of plan to view (c)

>> Nutrition Education

> Education

> WICSmart

→ >> Participant Care Plan

>> Breastfeeding Education

> Peer Counseling

> Equipment

Participant Care Plan Alerts Staff Notes Referrals

Choose Type: All

Date	Type	Author	Goals
6/12/2020	Health Screen		none set today
3/5/2020	Breastfeeding/RD		Not ready to set goal
12/27/2019	Certification		bf x 1 yr continue pumping & storing
4/24/2018	Breastfeeding/RD		to Cont to exclusively BF.
3/29/2018	Certification		increase her appetite

CREATE NEW PLAN (a) View Past Plans

Participant Care Plans			
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